

**TREASURE STATE ENDOWMENT PROGRAM (TSEP)
REQUEST FOR FUNDS FORM**

SECTION I - TSEP RECIPIENT INFORMATION				
TSEP CONTRACT NUMBER		DRAWDOWN NUMBER		TOTAL AMOUNT REQUESTED
NAME AND ADDRESS OF TSEP RECIPIENT:		MAKE DEPOSIT PAYABLE TO:		
		ABA (Routing) NUMBER:		
		ACCOUNT NUMBER:		
SECTION II - FINANCIAL INFORMATION				
	A Amount Budgeted	B Amount Expended Prior To This Draw	C Amount Requested	D Balance Remaining After This Draw
1. TOTAL ADMINISTRATION BUDGET *				
2. Percent	% of Total Grant	% of Column A		
3. TOTAL ACTIVITY BUDGET *				
4. Percent	% of Total Grant	% of Column A		
5. TOTAL TSEP BUDGET				
* See attached Uniform Status of Funds Spreadsheet for individual budget line items.	FOR DOC USE ONLY:		Total Amount Requested	\$
			Less 2% Retainage On Final Drawdown	\$
			Adjusted Amount Requested	\$
REMARKS:				
SECTION III - LOCAL APPROVAL				
DATE:	SIGNATURE		TITLE	
DATE:	COUNTERSIGNATURE		TITLE	
SECTION IV - DOC APPROVAL				
EXPENDITURES ARE REASONABLE, APPROPRIATE _____		APPROVED BY:		
FINANCIAL NUMBERS, SIGNATURES CORRECT _____				
CONSISTENT WITH PRECEDING DRAW, SBAS _____				
BUDGET AMENDMENT APPROVED _____				
		TITLE:		
		DATE:		